# Weathertzation Assistance Program

# Work Order (Bid Form)

# **WORK ORDER INFORMATION**

Work Order Name: WO/12012NW4034/1
Work Order Type: Weatherization
Audit Name: Audit (62)

#### **CLIENT INFORMATION**

Client Name: Address:
Client ID: 12012NW4034

Alt. Client ID:

## **AGENCY INFORMATION**

 Agency:
 N.W.T.N.E.D.C

 Agency Phone:
 (731) 364-3228

Address: Fax:

dresden, TN *Email Address:* 

Agency Contact: Smith, Randy

Work Phone:

Cell Phone:

Email Address:

Company Name & License Number:	
Contractor's Signature:	

### <u>COMMENT</u>

Report Run On: 5/16/2010

# Measures

Measure 3 DV	WH Tank Insulation			Componen	its			Inspected
Comment								
				Estimated	1		Actual	
# Material / Labor	Description / Comment	Units	Qty	<b>Unit Cost</b>	Total	Qty	<b>Unit Cost</b>	Total
Hot Water     Equipment	DHW Tank Insulation	Each	1					
	needs blanket /pipe in and extend pop off							
2 Labor	DHW Tank Insulation	Each	1					
Other Detail								
			Measur	e Sub Total:			Sub Total:	
Field Notes:								
	oor Ins. R-19			Componen	nts 1			Inspected
Comment				Estimated	1		Actual	
# Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total
1 Insulation	Floor Insulation - Fiberglass Faced Batt - R-19	SqFt	1056					
	add approx 1056 sqft of R-19 to floor 16 inch centers							
2 Labor	Floor Insulation - Fiberglass Faced Batt - R-19	SqFt	1056					
Other Detail								
			Measur	e Sub Total:			Sub Total:	
Field Notes:								

Client Name: Client ID: 12012NW4034 Alt. Client ID: DOE Weatherization Assistant Version 8.5.0

Work Order Name: WO/12012NW4034/1 Report Run On: 5/16/2010

Comment	Monitor is Needed			Componen				Inspected
				Estimated	<u> </u>		Actual	
# Material / Labor	Description / Comment	Units	Qty	<b>Unit Cost</b>	Total	Qty	Unit Cost	Total
Health and Safety Items	CO monitor	Each	1					
2 Labor	Labor	Hour	1					
Other Detail						1		
			Measur	e Sub Total:			Sub Total:	
Measure 8 Fix I	mproper Venting (Cloth	nes Dryer	)	Componen	ıts			Inspected
				Estimated			Actual	
	Description / Comment	Units	Qty	Estimated Unit Cost	l Total	Qty	Actual Unit Cost	Total
		<i>Units</i> Each	<b>Qty</b> 1			Qty		
<ul><li># Material / Labor</li><li>1 Health and Safety Items</li></ul>						Qty		
1 Health and Safety Items	Equipment  Add metal flex and					Qty		
1 Health and Safety Items	Equipment  Add metal flex and extend thru wal	Each	1			Qty		
<ul><li>1 Health and Safety Items</li><li>2 Labor</li></ul>	Equipment  Add metal flex and extend thru wal	Each	1			Qty		
<ul><li>1 Health and Safety Items</li><li>2 Labor</li></ul>	Equipment  Add metal flex and extend thru wal	Each	1			Qty		
<ul><li>1 Health and Safety Items</li><li>2 Labor</li></ul>	Equipment  Add metal flex and extend thru wal	Hour	1					
<ul><li>1 Health and Safety Items</li><li>2 Labor</li></ul>	Equipment  Add metal flex and extend thru wal	Hour	1	Unit Cost			Unit Cost	

Report Run On: 5/16/2010

		mproper Venting of Ba aust Fan	throom		Componen	ts			Inspected
C	omment								
					Estimated	<u> </u>		Actual	
#	Material / Labor	Description / Comment	Units	Qty	<b>Unit Cost</b>	Total	Qty	<b>Unit Cost</b>	Total
1	Health and Safety Items	Equipment	Each	1					
		extend vent thru roof							
2	Labor	Labor	Hour	1					
C	Other Detail								
				Measur	e Sub Total:		]	Sub Total:	
Г	Field Notes:				<u> </u>				
	Moscuro 10 Fix (								
C	comment	Other Water Heating Pr	oblem		Componen				Inspected
	comment	_			Estimated	<u> </u>		Actual	
		Other Water Heating Property Description / Comment	oblem <i>Unit</i> s	Qty	•		Qty		Inspected
#	comment	Description / Comment		<b>Qty</b> 1	Estimated	<u> </u>	Qty	Actual	
#	Comment  Material / Labor  Health and Safety	Description / Comment	Units		Estimated	<u> </u>	Qty	Actual	
<b>#</b> 1	Comment  Material / Labor  Health and Safety	Description / Comment Equipment REWIRE W/H NEEDS	Units		Estimated	<u> </u>	Qty	Actual	
<b>#</b> 1	Material / Labor Health and Safety Items	Description / Comment Equipment REWIRE W/H NEEDS DISCONNECT	<i>Units</i> Each	1	Estimated	<u> </u>	Qty	Actual	
<b>#</b> 1	Material / Labor Health and Safety Items Labor	Description / Comment Equipment REWIRE W/H NEEDS DISCONNECT	<i>Units</i> Each	1	Estimated	<u> </u>	Qty	Actual	
<b>#</b> 1	Material / Labor Health and Safety Items Labor	Description / Comment Equipment REWIRE W/H NEEDS DISCONNECT	<i>Units</i> Each	1	Estimated	<u> </u>	Qty	Actual	
<b>#</b> 1	Material / Labor Health and Safety Items Labor	Description / Comment Equipment REWIRE W/H NEEDS DISCONNECT	Units Each Hour	1	Estimated	<u> </u>		Actual	
<b>#</b> 1	Material / Labor Health and Safety Items  Labor  Cher Detail	Description / Comment Equipment REWIRE W/H NEEDS DISCONNECT	Units Each Hour	1	Estimated Unit Cost	<u> </u>		Actual Unit Cost	
<b>#</b> 1	Material / Labor Health and Safety Items Labor	Description / Comment Equipment REWIRE W/H NEEDS DISCONNECT	Units Each Hour	1	Estimated Unit Cost	<u> </u>		Actual Unit Cost	

Measure 11 Smoke Detector is Needed					Componen	ts		Inspected		
C	omment									
					Estimated	<u> </u>		Actual		
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total	
1	Health and Safety Items	Smoke detector	Each	1						
2	Labor	Labor	Hour	1						
(	Other Detail									
				Measur	e Sub Total:		] :	Sub Total:		
ſ	Field Notes:									
l										
			Work Or	der Gra	nd Total:		Gran	d Total:		